HEDIS® 2004 Executive Summary

For the

Statewide Analysis Report

Prepared for:

Maryland Department of Health and Mental Hygiene

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HEDIS 2004 Executive Summary

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HEDIS 2004 EXECUTIVE SUMMARY

Background

The Maryland Department of Health and Mental Hygiene (DHMH) is charged with the responsibility of evaluating the quality of care provided to over 466,000 Maryland Medicaid beneficiaries enrolled in the HealthChoice program, a mandatory managed care program established in 1997 under the §1115 federal waiver. One way to help evaluate quality is to use a standardized set of performance measures – and one predominant set of those measures is referred to as HEDIS (Health Plan Employer Data and Information Set). This group of performance measures was developed and is maintained by the National Committee for Quality Assurance (NCQA) in conjunction with the Centers for Medicare and Medicaid Services (CMS). As part of DHMH's ongoing quality-monitoring efforts, Managed Care Organizations (MCOs) are required by state regulations to annually submit selected HEDIS measures to the Department. By identifying both areas for improvement and the populations affected, and by tracking performance, HEDIS provides a mechanism to facilitate ongoing quality improvement.

Six of the seven HealthChoice MCOs participated in submission and validation of HEDIS 2004 data – these six included AMERIGROUP Maryland, Inc., Helix Family Choice, Inc., Jai Medical Systems Managed Care Organization, Inc., Maryland Physicians Care, Priority Partners and United Healthcare of the Mid-Atlantic, Inc. One new MCO, Diamond Plan, did not participate in the audits as they were not required to report on HEDIS for this year. The HEDIS 2004 scores represent HEDIS rates for services rendered in calendar year 2003. In order to improve HEDIS reporting practices and ensure the validity of data submitted by MCOs, DHMH contracted with an independent NCQA-licensed HEDIS audit firm to validate each MCO's results. Two of the six MCOs elected to contract on their own with another licensed HEDIS audit firm and scheduled audits outside of the DHMH contract. The contractor, HealthcareData.com, LLC (HDC), was the audit firm for the remaining four MCOs. Audit activities for all six MCOs were conducted as prescribed by NCQA's HEDIS Compliance Audit Standards, Policies and Procedures and were subject to NCQA oversight of these audit processes.

HealthChoice HEDIS Measures

For HEDIS 2004, DHMH selected 15 key HEDIS measures in four areas – including those which provide information about (1) how well widely accepted preventive practices, health screenings, and clinical treatments are incorporated into service delivery – the Effectiveness of Care Domain; (2) the accessibility and availability of needed health care without inappropriate barriers or delays – the Access and Availability of Care Domain; (3) volume of services provided and resource allocation – the Use of Services Domain; and (4) the stability of the health plan – the Health Plan Stability Domain. The measures in each of these areas were selected based on their ability to provide meaningful MCO comparative information relative to DHMH priorities and goals. DHMH may add to or delete from these 15 measures in future years. There are a total of 61 HEDIS 2004 measures calculated in 8 different domains from which to choose.

An important feature of HEDIS reporting is that the methodology for collecting data and calculating all of the measures is standardized in a set of detailed specifications. The specifications include the data fields to be collected, diagnosis and procedure codes to be included in each measure, selection of member subgroups to be examined, criteria for determining pass/fail status of each measure's validity and the use of statistical computations. It is essential that MCOs adhere to these established specifications so that the findings can be compared.

Audits are used to verify the numbers reported for the various measures, to identify problem areas and, ultimately, to help improve service delivery and health outcomes. Several issues that could effect an MCO's scores inlude:

- 1. <u>Incomplete Administrative Data</u> this requires an MCO to find some way to supplement missing data, usually through extensive medical record reviews.
- 2. <u>Non-Reportable Measures</u> this can occur because of bias in the rate due to inaccurate or incomplete data collection, the plan did not calculate the measure as required, or the plan elected not to report the rate as required.

It should also be noted that HEDIS measures do not adjust for population characteristics such as age, health status or MCO service area (urban vs rural). The MCOs vary greatly in size (enrollee size ranges from 6,000 to 167,000) and service area. Two MCOs operate statewide, while four are regional and one operates only in Baltimore City and parts of Baltimore County.

In the pages which follow, each of the 15 measures is addressed in three ways: (1) first, the measure is defined; (2) second, the **Significance** of how the HEDIS measure can affect the MCO is explained; and (3) third, the **Findings** section shows (per measure) which MCOs were found to be above, below or similar to the national Medicaid average and the Maryland state average. The Maryland average is only calculated if four or more MCOs report. The findings section is presented without actually using numbers, just descriptive terms such as "higher" and "lower. In addition to "higher" or "lower", a parenthetical descriptor ("better" or "not as good as") may immediately follow so that the reader will readily understand what the finding means. For more specific information about "how much" higher or lower a finding was, refer to Table A.

Three final points also need to be made regarding how we interpreted the findings. HDC had to decide, as we compared the findings with benchmarks, whether to place a plan in the "higher than, similar to or lower than" category. (1) If the finding was reported as a percentage, then we characterized a plan's result as being "higher than" whenever its percentage was three or more percentage points above the benchmark – and whenever the plan's result was three or more percentage points below the benchmark, then we characterized the result as being "lower than" the benchmark. Whenever plan results were less than three percentage points different from the benchmark, HDC characterized those results as being "similar to" – except if the plan result was equal to the benchmark, then HDC determined it was "the same as." (2) In some cases, results are reported in days (average length of stay) – and for these results, if the difference was at least one-half day, then the plan was characterized as being either higher or lower than the benchmark; if the difference was less than half a day, then the plan result was said to be "similar to" (or identical as the case may be). (3) Finally, if the result was reported as a rate per thousand (such as discharges per thousand), HDC again used "one half" (that is, 0.5) – so, if a rate per thousand for a plan was at least 0.5 different from the benchmark, then it was characterized as being "higher than" or "lower than;" if the rate difference was less than 0.5, then HDC characterized the result as "similar to" (or, again, identical as the case may be).

Specification of and Findings for the 15 HEDIS 2004 Measures

(A) EFFECTIVENESS OF CARE DOMAIN:

(1) <u>Childhood Immunization Status</u> – measures immunization status for children who turned 2 years old during calendar year 2003 and were continuously enrolled for 12 months immediately preceding their second birthday, who were identified as having four DTP/DTaP, three IPV/OPV, one MMR, three H influenza type B, three hepatitis B and one chicken pox vaccine (VZV), by the member's second birthday. Within this measure, values for two separate combination rates are calculated:

Combination #1 measures children who have received four DTP or DTaP vaccinations and three OPV or IPV vaccinations and one MMR and three HiB vaccinations and three hepatitis B vaccinations, as specified above.

Combination #2 measures children who have received all of the vaccines listed in Combination #1 and at least one VZV.

Significance: Administering timely and complete childhood immunizations is a key to disease prevention. The American Academy of Pediatrics (AAP), the American Academy of Family Physicians (AAFP), the Centers for Disease Control and Prevention (CDC) and the Advisory Committee on Disease Prevention developed immunization guidelines and recommend that by two years of age children should receive the immunizations identified in the guidelines. This HEDIS measure provides useful information on the degree to which the MCO incorporates these widely accepted guidelines into health care practices and the provision of all required immunizations. Related measures which focus on children's health include Children's Access to Primary Care Practitioners, Well Child Visits in the First Fifteen Months of Life, Well Child Visits in the Third through Sixth Year of Life.

Findings: AMERIGROUP Maryland, Inc., Helix Family Choice, Inc., Jai Medical Systems Managed Care Organization, Inc., Maryland Physicians Care, Priority Partners and United Healthcare of the Mid-Atlantic, Inc. were able to report this measure.

MCOs compared to the Maryland Average Reportable Rate (MARR)

- AMERIGROUP Maryland, Inc., Helix Family Choice, Inc., and Jai Medical Systems Managed Care Organization, Inc. had rates that were higher than (better than) the Maryland Average Reportable Rate (MARR) for Combo 1.
- Maryland Physicians Care and United Healthcare of the Mid-Atlantic, Inc. had rates that were lower than (not as good as) the MARR for Combo 1.
- Priority Partners had a rate that was similar to the MARR.
- AMERIGROUP Maryland, Inc. and Jai Medical Systems Managed Care Organization, Inc. had rates that were higher than (better than) the MARR for Combo 2.
- Maryland Physicians Care and United Healthcare of the Mid-Atlantic, Inc. had rates that were lower than (not as good as) the MARR for Combo 2.
- Helix Family Choice, Inc. and Priority Partners had rates that were similar to the MARR for Combo 2.

MCOs compared to the National Medicaid HEDIS 2003 Mean (NMH)

- AMERIGROUP Maryland, Inc., Helix Family Choice, Inc., Jai Medical Systems Managed Care Organization, Inc., Maryland Physicians Care, and Priority Partners had rates that were higher than (better than) the National Medicaid HEDIS 2003 Mean (NMH) for both Combination 1 and Combination 2.
- United Healthcare of the Mid-Atlantic, Inc. had a rate that was similar to the NMH for both Combination 1 and Combination 2.

MARR compared to the 2003 MARR and the 2003 NMH

• The 2004 MARR was higher than (better than) the 2003 MARR and the 2003 NMH for both Combination 1 and Combination 2.

(2) <u>Adolescent Immunization Status</u> – measures immunization status for adolescents who turned 13 during the calendar year 2003 and were continuously enrolled for 12 months immediately preceding their 13th birthday and who were identified as having had a second dose of MMR, three hepatitis B and one chicken pox vaccination (VZV) by the member's 13th birthday. Within this measure, values for two separate combination rates are calculated:

Combination #1 measures adolescents who have received the second MMR and three hepatitis B vaccinations as specified above.

Combination #2 measures adolescents who have received all of the vaccinations listed in Combination #1 and at least one VZV.

Significance: The AAP, AAFP, CDC, and the Advisory Committee on Disease Prevention developed immunization guidelines and recommended that by age 13 years children should receive the immunizations identified in the guidelines. This HEDIS measure provides useful information on the degree to which the MCO incorporates these widely accepted guidelines into health care practices and the provision of all required immunizations. Related measures include Adolescent Well Visits, Childhood Immunization Status and Children's Access to Primary Care Practitioners.

<u>Findings:</u> AMERIGROUP Maryland, Inc., Helix Family Choice, Inc., Jai Medical Systems Managed Care Organization, Inc., Maryland Physicians Care, Priority Partners and United Healthcare of the Mid-Atlantic, Inc. were able to report this measure.

MCOs compared to the Maryland Average Reportable Rate (MARR)

- AMERIGROUP Maryland, Inc., Jai Medical Systems Managed Care Organization, Inc. and Priority Partners had rates that were higher than (better than) the MARR for Combo 1 and Combo 2.
- United Healthcare of the Mid-Atlantic, Inc. had a rate that was lower than (not as good as) the MARR for both Combination 1 and Combination 2. Maryland Physicians Care had a rate that was lower than (not as good as) the MARR for Combo 2.
- Maryland Physicians Care had a rate that was similar to the MARR for Combo 1 and Helix Family Choice, Inc. had
 a rate that was the same as the MARR for Combo 1. Helix Family Choice, Inc. had a rate that was similar to the
 MARR for Combo 2.

MCOs compared to the National Medicaid HEDIS 2003 Mean (NMH)

- AMERIGROUP Maryland, Inc., Helix Family Choice, Inc., Jai Medical Systems Managed Care Organization, Inc., Maryland Physicians Care and Priority Partners had rates that were higher than the NMH for both Combo 1 and Combo 2.
- United Healthcare of the Mid-Atlantic, Inc. had a rate that was lower than (not as good as) the NMH for Combo 1 and a rate that was similar to the NMH for Combo 2.

MARR compared to the 2003 MARR and the 2003 NMH

• The 2004 MARR was higher than (better than) the 2003 MARR and 2003 NMH for both Combination 1 and Combination 2.

(3) <u>Breast Cancer Screening</u> – measures women age 52 through 69 who were continuously enrolled during the calendar year 2003 and the preceding year (with no more than one gap in enrollment of up to 30 days eligibility period during each year) who had a mammogram during the reporting year or the prior year.

Significance: Approximately one in ten American women will develop breast cancer before the age of 80, according to the National Cancer Institute. The American Cancer Society recommends mammograms as an effective means of detecting breast cancer early. This HEDIS measure provides useful information on the degree to which the MCO has conformed to this widely accepted guideline.

<u>Findings:</u> AMERIGROUP Maryland, Inc., Helix Family Choice, Inc., Jai Medical Systems Managed Care Organization, Inc., Maryland Physicians Care, Priority Partners and United Healthcare of the Mid-Atlantic, Inc. were able to report this measure.

MCOs compared to the Maryland Average Reportable Rate (MARR)

- Helix Family Choice, Inc., Jai Medical Systems Managed Care Organization, Inc., and Maryland Physicians Care had rates that were higher than (better than) the MARR.
- AMERIGROUP Maryland, Inc. had a rate that was lower than (not as good as) the MARR.
- United Healthcare of the Mid-Atlantic, Inc. had a rate that was similar to the MARR and Priority Partners had a rate that was the same as the MARR.

MCOs compared to the National Medicaid HEDIS 2003 Mean (NMH)

- Helix Family Choice, Inc. had a rate that was higher than (better than) the NMH.
- AMERIGROUP Maryland, Inc., Priority Partners and United Healthcare of the Mid-Atlantic, Inc. had rates that were lower than (not as good as) the NMH.
- Jai Medical Systems Managed Care Organization, Inc. had a rate that was similar to the NMH and Maryland Physicians Care had a rate that was the same as the NMH.

MARR compared to the 2002 MARR and the NMH

- The 2004 MARR was similar to the 2003 MARR.
- The 2004 MARR was lower than (not as good as) the NMH.
- (4) <u>Cervical Cancer Screening</u> measures women age 21 through 64 who were continuously enrolled during the calendar year 2003 (with no more than one gap in enrollment of up to 45 days) who received a Pap test during the reporting year or the two prior years.

<u>Significance:</u> Cervical cancer, if detected in the early stages, is highly curable. The American Cancer Society recommends annual Pap tests as an effective means of detecting cervical cancer early. This HEDIS measure provides useful information on the degree to which the MCO has conformed to this widely accepted guideline.

Findings: AMERIGROUP Maryland, Inc., Helix Family Choice, Inc., Jai Medical Systems Managed Care Organization, Inc., Maryland Physicians Care, Priority Partners and United Healthcare of the Mid-Atlantic, Inc. were able to report this measure.

MCOs compared to the Maryland Average Reportable Rate (MARR)

- Helix Family Choice, Inc. and Priority Partners had rates that were higher than (better than) the MARR.
- Jai Medical Systems Managed Care Organization, Inc. and United Healthcare of the Mid-Atlantic, Inc. had rates that were lower than (not as good as) the MARR.
- AMERIGROUP Maryland, Inc. and Maryland Physicians Care had rates that were similar to the MARR.

MCOs compared to the National Medicaid HEDIS 2003 Mean (NMH)

- Helix Family Choice, Inc. had a rate that was higher than (better than) the NMH.
- Jai Medical Systems Managed Care Organization, Inc. and United Healthcare of the Mid-Atlantic, Inc. had rates that were lower than (not as good as) the NMH.
- AMERIGROUP Maryland, Inc., Maryland Physicians Care and Priority Partners had a rate that was similar to the NMH

MARR compared to the 2003 MARR and the NMH

- The 2004 MARR was higher than (better than) the 2003 MARR.
- The 2004 MARR was similar to the NMH.
- **(5)** <u>Comprehensive Diabetes Care</u> measures care for members with diabetes (Type 1 and Type 2) age 18 through 75 years old who were continuously enrolled during the calendar year 2003.

<u>Significance:</u> Diabetes is a disorder of metabolism – the way our bodies use digested food for growth and energy. Diabetes is widely recognized as one of the leading causes of death and disability in the United States. Diabetes is associated with long-term complications that affect almost every major part of the body. It contributes to blindness, heart disease, strokes, kidney failure, amputations, and nerve damage. Uncontrolled diabetes can complicate pregnancy, and birth defects are more common in babies born to women with diabetes. The goal of diabetes management is to keep blood glucose levels as close to the normal (non-diabetic) range as is safely possible. This HEDIS measure includes multiple performance points that collectively evaluate the MCO's effectiveness in working with its providers and members to monitor and help manage diabetes.

<u>Findings:</u> AMERIGROUP Maryland, Inc., Helix Family Choice, Inc., Jai Medical Systems Managed Care Organization, Inc., Maryland Physicians Care, Priority Partners and United Healthcare of the Mid-Atlantic, Inc. were able to report all of the numerators in this measure.

For the HbA1c Testing Numerator:

MCOs compared to the Maryland Average Reportable Rate (MARR)

- AMERIGROUP Maryland, Inc. and Jai Medical Systems Managed Care Organization, Inc. had rates that were higher than (better than) the MARR.
- United Healthcare of the Mid-Atlantic, Inc. had a rate that was lower than (not as good as) the MARR.
- Maryland Physicians Care and Priority Partners had rates that were similar to the MARR.
- Helix Family Choice, Inc. had a rate that was the same as the MARR.

MCOs compared to the National Medicaid HEDIS 2003 Mean (NMH)

- AMERIGROUP Maryland, Inc., Helix Family Choice, Inc., Jai Medical Systems Managed Care Organization, Inc., Maryland Physicians Care and Priority Partners had rates that were higher than (better than) the NMH.
- United Healthcare of the Mid-Atlantic, Inc. had a rate that was similar to the NMH.

MARR compared to the 2003 MARR and the NMH

- The 2004 MARR for this numerator was higher than (better than) the 2003 MARR.
- The 2004 MARR was higher than (better than) the NMH for this numerator.

For the Poor HbA1c Control Numerator:

It should be noted that for this measure a *lower* rate indicates better performance (i.e., low rates of poor control indicate better control of the diabetic patient).

MCOs compared to the Maryland Average Reportable Rate (MARR)

- Maryland Physicians Care, Priority Partners and United Healthcare of the Mid-Atlantic, Inc. had rates that were higher than (not as good as) the MARR.
- AMERIGROUP Maryland, Inc., Helix Family Choice, Inc. and Jai Medical Systems Managed Care Organization, Inc. had rates that were lower than (better than) the MARR.

MCOs compared to the National Medicaid HEDIS 2003 Mean (NMH)

- Maryland Physicians Care had a rate that was higher than (not as good as) the NMH.
- AMERIGROUP Maryland, Inc., Helix Family Choice, Inc. and Jai Medical Systems Managed Care Organization, Inc. had rates that were lower than (better than) the NMH.
- Priority Partners and United Healthcare of the Mid-Atlantic, Inc. had rates that were similar to the NMH.

MARR compared to the 2003 MARR and the NMH

- The 2004 MARR was lower than the (better than) 2003 MARR.
- The 2004 MARR was lower than (better than) the NMH.

For the Eye Exam Numerator:

MCOs compared to the Maryland Average Reportable Rate (MARR)

- Jai Medical Systems Managed Care Organization, Inc. and United Healthcare of the Mid-Atlantic, Inc. had rates that were higher than (better than) the MARR.
- Priority Partners had a rate that was lower than (not as good as) the MARR.
- AMERIGROUP Maryland, Inc., Helix Family Choice, Inc. and Maryland Physicians Care had rates that were similar to the MARR.

MCOs compared to the National Medicaid HEDIS 2003 Mean (NMH)

- Jai Medical Systems Managed Care Organization, Inc. and United Healthcare of the Mid-Atlantic, Inc. had rates that were higher than (better than) the NMH.
- Priority Partners had a rate that was lower than (not as good as) the NMH.
- AMERIGROUP Maryland, Inc., Helix Family Choice, Inc. and Maryland Physicians Care had rates that were similar to the NMH.

MARR compared to the 2003 MARR and the NMH

- The 2004 MARR for this numerator was the same as the 2003 MARR.
- The 2004 MARR was similar to the NMH for this numerator.

For the LDL-C Screening Numerator:

MCOs compared to the Maryland Average Reportable Rate (MARR)

- AMERIGROUP Maryland, Inc., Jai Medical Systems Managed Care Organization, Inc. and Maryland Physicians Care had rates that were higher than (better than) the MARR.
- Priority Partners and United Healthcare of the Mid-Atlantic, Inc. had rates that were lower than (not as good as) the MARR.

• Helix Family Choice, Inc. had a rate that was similar to the MARR.

MCOs compared to the National Medicaid HEDIS 2003 Mean (NMH)

 AMERIGROUP Maryland, Inc., Helix Family Choice, Inc., Jai Medical Systems Managed Care Organization, Inc., Maryland Physicians Care, Priority Partners and United Healthcare of the Mid-Atlantic, Inc. had rates that were higher than (better than) the NMH.

MARR compared to the 2003 MARR and the NMH

- The 2004 MARR was higher than (better than) the 2003 MARR.
- The 2004 MARR was higher than (better than) the NMH.

For the LDL-C Level Numerator (LESS THAN 130 NUMERATOR):

MCOs compared to the Maryland Average Reportable Rate (MARR)

- Jai Medical Systems Managed Care Organization, Inc. had a rate that was higher than (better than) the MARR.
- Maryland Physicians Care and Priority Partners had rates that were lower than (not as good as) the MARR.
- AMERIGROUP Maryland, Inc. and United Healthcare of the Mid-Atlantic, Inc. had rates that were similar to the MARR.
- Helix Family Choice, Inc. had a rate that was the same as the MARR.

MCOs compared to the National Medicaid HEDIS 2003 Mean (NMH)

 AMERIGROUP Maryland, Inc., Helix Family Choice, Inc., Jai Medical Systems Managed Care Organization, Inc., Maryland Physicians Care, Priority Partners and United Healthcare of the Mid-Atlantic, Inc. had rates that were higher than (better than) the NMH.

MARR compared to the 2003 MARR and the NMH

- The 2004 MARR for this numerator was higher than (better than) the 2003 MARR.
- The 2004 MARR was higher than (better than) the NMH.

For the LDL-C Level Numerator (LESS THAN 100 NUMERATOR):

MCOs compared to the Maryland Average Reportable Rate (MARR)

- Jai Medical Systems Managed Care Organization, Inc. had a rate that was higher than (better than) the MARR.
- Priority Partners and United Healthcare of the Mid-Atlantic, Inc. had rates that were lower than (not as good as) the MARR.
- Helix Family Choice, Inc. and Maryland Physicians Care had rates that were similar to the MARR.
- AMERIGROUP Maryland, Inc. had a rate that was the same as the MARR.

MCOs compared to the National Medicaid HEDIS 2003 Mean (NMH)

• This is a new numerator from NCQA for 2004, therefore there are no numbers to compare this with at this point.

MARR compared to the 2003 MARR and the NMH

This is a new numerator from NCQA for 2004, therefore there are no numbers to compare this with at this point.

For the Monitoring for Diabetic Nephropathy Numerator:

MCOs compared to the Maryland Average Reportable Rate (MARR)

- AMERIGROUP Maryland, Inc. and Jai Medical Systems Managed Care Organization, Inc. had rates that were higher than (better than) the MARR.
- Helix Family Choice, Inc., Maryland Physicians Care, Priority Partners and United Healthcare of the Mid-Atlantic, Inc. had rates that were lower than (not as good as) the MARR.

MCOs compared to the National Medicaid HEDIS 2003 Mean (NMH)

- AMERIGROUP Maryland, Inc. and Jai Medical Systems Managed Care Organization, Inc. had rates that were higher than (better than) the NMH.
- Helix Family Choice, Inc., Maryland Physicians Care and United Healthcare of the Mid-Atlantic, Inc. had rates that were lower than (not as good as) the NMH.
- Priority Partners had a rate that was the same as the NMH.

MARR compared to the 2003 MARR and the NMH

- The 2004 MARR for this numerator was similar to the 2003 MARR.
- The 2004 MARR was higher than (better than) the NMH.

(B) ACCESS/AVAILABILITY OF CARE DOMAIN:

(6) <u>Children's and Adolescents' Access to Primary Care Practitioners</u> – measures the accessibility and availability of health care for children age 12 months through 24 months and 25 months through 6 years who were continuously enrolled during calendar year 2003 and who had a visit with an MCO primary care practitioner during the calendar year 2003. It also measures children age 7 years through 11 years and 12 years to 19 years who were continuously enrolled during the calendar year 2003 and the year prior to the measurement year and who had a visit with an MCO primary care practitioner during calendar year 2003 or the year prior to the measurement year.

<u>Significance:</u> Children's and Adolescents' access to the health care delivery system may be inferred by evaluating the rates at which children receive pediatric preventive/ambulatory health services. This HEDIS measure evaluates the degree to which the MCO insures children in the early years of life have received the necessary preventive health services so as to help reduce the future impact of untreated medical and emotional problems.

Findings:

For the category pertaining to 12 to 24 months, AMERIGROUP Maryland, Inc., Helix Family Choice, Inc., Jai Medical Systems Managed Care Organization, Inc., Maryland Physicians Care, Priority Partners and United Healthcare of the Mid-Atlantic, Inc. were able to report this numerator.

MCOs compared to the Maryland Average Reportable Rate (MARR)

- AMERIGROUP Maryland, Inc. had a rate that was higher than (better than) the MARR.
- Jai Medical Systems Managed Care Organization, Inc. had a rate that was lower than (not as good as) the MARR.
- Helix Family Choice, Inc., Maryland Physicians Care, Priority Partners and United Healthcare of the Mid-Atlantic, Inc. had rates that were similar to the MARR.

MCOs compared to the National Medicaid HEDIS 2003 Mean (NMH)

- AMERIGROUP Maryland, Inc., Helix Family Choice, Inc., Maryland Physicians Care, Priority Partners and United Healthcare of the Mid-Atlantic, Inc. had rates that were higher than (better than) the NMH.
- Jai Medical Systems Managed Care Organization, Inc. had a rate that was lower than (not as good as) the NMH.

MARR compared to the 2003 MARR and the NMH

- The 2004 MARR was similar to the 2003 MARR for this numerator.
- The 2004 MARR was also similar to the NMH for this numerator.

For the category pertaining to 25 months to 6-year-old children, AMERIGROUP Maryland, Inc., Helix Family Choice, Inc., Jai Medical Systems Managed Care Organization, Inc., Maryland Physicians Care, Priority Partners and United Healthcare of the Mid-Atlantic, Inc. were able to report this numerator.

MCOs compared to the Maryland Average Reportable Rate (MARR)

- AMERIGROUP Maryland, Inc. and United Healthcare of the Mid-Atlantic, Inc. had rates that were higher than (better than) the MARR.
- Jai Medical Systems Managed Care Organization, Inc. and Priority Partners had rates that were lower than (not as good as) the MARR.
- Helix Family Choice, Inc. and Maryland Physicians Care had rates that were similar to the MARR

MCOs compared to the National Medicaid HEDIS 2003 Mean (NMH)

- AMERIGROUP Maryland, Inc., Helix Family Choice, Inc., Maryland Physicians Care and United Healthcare of the Mid-Atlantic, Inc. had rates that were higher than (better than) the NMH.
- Jai Medical Systems Managed Care Organization, Inc. had a rate that was similar to the NMH.
- Priority Partners had a rate that was the same as the NMH.

MARR compared to the 2003 MARR and the NMH

- The 2004 MARR was similar to the 2003 MARR.
- The 2004 MARR was higher than (better than) the NMH.

For the category pertaining to 7 to 11 year old children, AMERIGROUP Maryland, Inc., Helix Family Choice, Inc., Jai Medical Systems Managed Care Organization, Inc., Maryland Physicians Care, Priority Partners and United Healthcare of the Mid-Atlantic, Inc. were able to report this numerator.

MCOs compared to the Maryland Average Reportable Rate (MARR)

- AMERIGROUP Maryland, Inc., Maryland Physicians Care and United Healthcare of the Mid-Atlantic, Inc. had rates that were higher than (better than) the MARR.
- Helix Family Choice, Inc. and Priority Partners had rates that were lower than the MARR.
- Jai Medical Systems Managed Care Organization, Inc. had a rate that was similar to the MARR.

MCOs compared to the National Medicaid HEDIS 2003 Mean (NMH)

- AMERIGROUP Maryland, Inc., Maryland Physicians Care and United Healthcare of the Mid-Atlantic, Inc. had rates that were higher than (better than) the NMH.
- Helix Family Choice, Inc., Jai Medical Systems Managed Care Organization, Inc. and Priority Partners had rates that were similar to the NMH.

MARR compared to the 2003 MARR and the NMH

- The 2004 MARR was similar to the 2003 MARR.
- The 2004 MARR was higher than (better than) the NMH.

For the category pertaining to 12 to 19 year old adolescents, AMERIGROUP Maryland, Inc., Helix Family Choice, Inc., Jai Medical Systems Managed Care Organization, Inc., Maryland Physicians Care, Priority Partners and United Healthcare of the Mid-Atlantic, Inc. were able to report this new numerator in this measure.

MCOs compared to the Maryland Average Reportable Rate (MARR)

- Maryland Physicians Care had a rate that was higher than (better than) the MARR.
- Helix Family Choice, Inc., Jai Medical Systems Managed Care Organization, Inc. and Priority Partners had rates that were lower than (not as good as) the MARR.
- United Healthcare of the Mid-Atlantic, Inc. had a rate that was similar to the MARR.
- AMERIGROUP Maryland, Inc. had a rate that was the same as the MARR.

MCOs compared to the National Medicaid HEDIS 2003 Mean (NMH)

• This was a new numerator for this measure in 2004. Therefore, there were no rates to compare with for this current measurement year.

(7) <u>Adults' Access to Preventive/Ambulatory Health Services</u> – measures enrollees age 20 through 44, 45 through 64 and 65 years and older who were continuously enrolled during calendar year 2003 and who had an ambulatory or preventive-care visit during calendar year 2003.

<u>Significance:</u> Adults' access to the health care delivery system may be inferred by evaluating the rates at which adults receive preventive/ambulatory health services. This HEDIS measure evaluates the degree to which the MCO insures that every adult receives the necessary preventive health services which help to discern unidentified medical and emotional problems and which contribute to the treatment of ongoing problems so they do not become unmanageable.

Findings:

For the age group 20 to 44 year old adults, AMERIGROUP Maryland, Inc., Helix Family Choice, Inc., Jai Medical Systems Managed Care Organization, Inc., Maryland Physicians Care, Priority Partners and United Healthcare of the Mid-Atlantic, Inc. were able to report this numerator.

MCOs compared to the Maryland Average Reportable Rate (MARR)

- Helix Family Choice, Inc. and Priority Partners had rates that were higher than (better than) the MARR.
- Jai Medical Systems Managed Care Organization, Inc. had a rate that was lower than (not as good as) the MARR.
- AMERIGROUP Maryland, Inc. had a rate that was similar to the MARR.
- Maryland Physicians Care and United Healthcare of the Mid-Atlantic, Inc. had rates that were the same as the MARR.

MCOs compared to the National Medicaid HEDIS 2003 Mean (NMH)

- AMERIGROUP Maryland, Inc. and Jai Medical Systems Managed Care Organization, Inc. had rates that were lower than (not as good as) the NMH.
- Helix Family Choice, Inc., Maryland Physicians Care, Priority Partners and United Healthcare of the Mid-Atlantic, Inc. had rates that were similar to the NMH.

MARR compared to the 2003 MARR and the NMH

- The 2004 MARR was higher than (better than) the 2003 MARR.
- The 2004 MARR was similar to the NMH.

For the age group 45 to 64 year old adults, AMERIGROUP Maryland, Inc., Helix Family Choice, Inc., Jai Medical Systems Managed Care Organization, Inc., Maryland Physicians Care, Priority Partners and United Healthcare of the Mid-Atlantic, Inc. were able to report this numerator.

MCOs compared to the Maryland Average Reportable Rate (MARR)

- AMERIGROUP Maryland, Inc. and Maryland Physicians Care had rates that were lower than (not as good as) the MARR.
- Helix Family Choice, Inc., Priority Partners and United Healthcare of the Mid-Atlantic, Inc. had rates that were similar to the MARR.
- Jai Medical Systems Managed Care Organization, Inc. had a rate that was the same as the MARR.

MCOs compared to the National Medicaid HEDIS 2003 Mean (NMH)

- Helix Family Choice, Inc., Priority Partners and United Healthcare of the Mid-Atlantic, Inc. had rates that were higher than (better than) the NMH.
- AMERIGROUP Maryland, Inc., Jai Medical Systems Managed Care Organization, Inc. and Maryland Physicians
 Care had rates that were similar to the NMH.

MARR compared to the 2003 MARR and the NMH

- The 2004 MARR was similar to the 2003 MARR.
- The 2004 MARR was similar to the NMH.

For the age group 65 and older, all six MCOs had eligible member populations that were less than 30 and, per NCQA reporting guidelines, received a NA (Not Applicable) for the rate.

(8) <u>Prenatal and Postpartum Care Rates</u> – measures prenatal and postpartum care for women who delivered a live birth between November 6th of the year prior to the calendar year 2002 and November 5th of the calendar year 2003, who were continuously enrolled at least 43 days prior to delivery through 56 days after delivery.

Significance: Good prenatal and postpartum care is extremely important preventive medicine. A healthy lifestyle, vitamin supplementation, and identification of maternal risk factors all need to begin early in pregnancy to have the best impact on outcomes. Similarly, the eight weeks after giving birth are a period of physical, emotional and social changes for the mother, during a time when she is also adjusting to caring for her new baby. This HEDIS measure is one of high visibility as it evaluates the MCO's ability to insure adequate prenatal and postpartum care is provided to a highly mobile population. Low compliance rates could result in higher lengths of stay for newborns as well reduced detection of medical and emotional problems occurring after childbirth.

Findings:

For Timeliness of Prenatal Care numerator, AMERIGROUP Maryland, Inc., Helix Family Choice, Inc., Jai Medical Systems Managed Care Organization, Inc., Maryland Physicians Care, Priority Partners and United Healthcare of the Mid-Atlantic, Inc. were able to report this numerator.

MCOs compared to the Maryland Average Reportable Rate (MARR)

- AMERIGROUP Maryland, Inc. and Helix Family Choice, Inc. had rates that were higher than (better than) the MARR.
- Jai Medical Systems Managed Care Organization, Inc. Maryland Physicians Care, Priority Partners and United Healthcare of the Mid-Atlantic, Inc. had rates that were lower than (not as good as) the MARR.

MCOs compared to the National Medicaid HEDIS 2002 Mean (NMH)

• AMERIGROUP Maryland, Inc., Helix Family Choice, Inc., Jai Medical Systems Managed Care Organization, Inc., Maryland Physicians Care, Priority Partners and United Healthcare of the Mid-Atlantic, Inc. had rates that were higher than (better than) the NMH.

MARR compared to the 2003 MARR and the NMH

- The 2004 MARR was higher than (better than) the 2003 MARR.
- The 2004 MARR was higher than (better than) the NMH.

For Postpartum Care numerator, AMERIGROUP Maryland, Inc., Helix Family Choice, Inc., Jai Medical Systems Managed Care Organization, Inc., Maryland Physicians Care, Priority Partners and United Healthcare of the Mid-Atlantic, Inc. were able to report this numerator.

MCOs compared to the Maryland Average Reportable Rate (MARR)

- AMERIGROUP Maryland, Inc. and Priority Partners had rates that were higher than (better than) the MARR.
- Jai Medical Systems Managed Care Organization, Inc. had a rate that was lower than (not as good as) the MARR.
- Helix Family Choice, Inc., Maryland Physicians Care and United Healthcare of the Mid-Atlantic, Inc. had rates that were similar to the MARR.

MCOs compared to the National Medicaid HEDIS 2003 Mean (NMH)

- AMERIGROUP Maryland, Inc., Helix Family Choice, Inc., Maryland Physicians Care, Priority Partners and United Healthcare of the Mid-Atlantic, Inc. had rates that were higher than (better than) the NMH.
- Jai Medical Systems Managed Care Organization, Inc. had a rate that was similar to the NMH.

MARR compared to the 2003 MARR and the NMH

- The 2004 MARR was higher than (better than) the 2003 MARR.
- The 2004 MARR was the higher than (better than) the NMH.

(C) USE OF SERVICES DOMAIN:

(9) Frequency of Ongoing Prenatal Care – measures the percentage of pregnant Medicaid-enrolled women who received < 21 percent, 21 percent through 40 percent, 41 percent through 60 percent, 61 percent through 80 percent or ≥ 81 percent of the expected number of prenatal care visits, adjusted for gestational age and the month the member enrolled in the MCO. By specifying that the product line at risk include only live births, this measure captures only a percentage of an MCO's Medicaid members' pregnancies.

Significance: Complications can arise at any time during pregnancy. For this reason, the frequency and adequacy of ongoing prenatal visits is an important factor in monitoring and minimizing pregnancy problems.

The American College of Obstetricians and Gynecologists recommends that prenatal care begin as early in the first trimester of pregnancy as possible, with additional visits every 4 weeks for the first 28 weeks of pregnancy, every 2 to 3 weeks for the next 8 weeks, and then weekly until delivery. This HEDIS measure evaluates the MCO's ability to insure an adequate amount of prenatal care is provided throughout a woman's pregnancy so as to help reduce the potential for higher lengths of stay for newborns, as well as help reduce future medical and emotional problems.

Findings:

For the less than 21 percent of expected visits numerator, AMERIGROUP Maryland, Inc., Helix Family Choice, Inc., Jai Medical Systems Managed Care Organization, Inc., Maryland Physicians Care, Priority Partners and United Healthcare of the Mid-Atlantic, Inc. were able to report this numerator.

MCOs compared to the Maryland Average Reportable Rate (MARR)

- United Healthcare of the Mid-Atlantic, Inc. had a rate that was higher than (not as good as) the MARR.
- AMERIGROUP Maryland, Inc., Helix Family Choice, Inc., Jai Medical Systems Managed Care Organization, Inc., Maryland Physicians Care and Priority Partners had rates that were lower than (better than) the MARR.

MCOs compared to the National Medicaid HEDIS 2003 Mean (NMH)

- AMERIGROUP Maryland, Inc., Helix Family Choice, Inc., Jai Medical Systems Managed Care Organization, Inc., Maryland Physicians Care and Priority Partners had rates that were lower than (better than) the NMH.
- United Healthcare of the Mid-Atlantic, Inc. had a rate that was similar to the NMH.

MARR compared to the 2003 MARR and the NMH

- The 2004 MARR was similar to the MARR from 2003.
- The 2004 MARR was lower than (better than) the NMH.

For the greater than 80 percent of expected visits numerator, AMERIGROUP Maryland, Inc., Helix Family Choice, Inc., Jai Medical Systems Managed Care Organization, Inc., Maryland Physicians Care, Priority Partners and United Healthcare of the Mid-Atlantic, Inc. were able to report this numerator.

MCOs compared to the Maryland Average Reportable Rate (MARR)

- AMERIGROUP Maryland, Inc., Helix Family Choice, Inc., Jai Medical Systems Managed Care Organization, Inc. and Maryland Physicians Care had rates that were higher than (better than) the MARR.
- Priority Partners and United Healthcare of the Mid-Atlantic, Inc. had rates that were lower than (not as good as) the MARR.

MCOs compared to the National Medicaid HEDIS 2003 Mean (NMH)

- AMERIGROUP Maryland, Inc., Helix Family Choice, Inc., Jai Medical Systems Managed Care Organization, Inc., Maryland Physicians Care and Priority Partners had rates that were higher than (better than) the NMH.
- United Healthcare of the Mid-Atlantic, Inc. had a rate that was similar to the NMH.

MARR compared to the 2003 MARR and the NMH

- The 2004 MARR was higher than (better than) the 2003 MARR.
- The 2004 MARR was higher than (better than) the NMH.

(10) Well-Child Visits in the First 15 Months of Life – measures members who turned 15 months old during the calendar year 2003, who were continuously enrolled in the MCO from 31 days of age, and who received either zero, one, two, three, four, five or more well-child visits with a primary care practitioner during their first 15 months of life. The two ends of this zero to 5+ continuum are reported below.

Significance: During the first 15 months of life, an infant develops in key areas including mental abilities, physical growth, motor skills, hand-eye coordination, and social and emotional growth. Well-child visits permit early detection and treatment of problems and provide an opportunity for preventive care and parent counseling. The American Academy of Pediatrics recommends six well-child visits during the first 15 months of life. This HEDIS measure evaluates the degree to which the MCO insures children in the early years of life have received the necessary preventive health services so as to help reduce the future impact of untreated medical and emotional problems.

Findings:

For the zero visit rate, AMERIGROUP Maryland, Inc., Helix Family Choice, Inc., Jai Medical Systems Managed Care Organization, Inc., Maryland Physicians Care, Priority Partners and United Healthcare of the Mid-Atlantic, Inc. were able to report this numerator.

MCOs compared to the Maryland Average Reportable Rate (MARR)

- Jai Medical Systems Managed Care Organization, Inc. had a rate that was higher than (not as good as) the MARR.
- Helix Family Choice, Inc. had a rate that was lower than (better than) the MARR.
- AMERIGROUP Maryland, Inc., Maryland Physicians Care, Priority Partners and United Healthcare of the Mid-Atlantic, Inc. had rates that were similar to the MARR.

MCOs compared to the National Medicaid HEDIS 2003 Mean (NMH)

- AMERIGROUP Maryland, Inc., Helix Family Choice, Inc., Maryland Physicians Care, Priority Partners and United Healthcare of the Mid-Atlantic, Inc. had rates that were lower than (better than) the NMH.
- Jai Medical Systems Managed Care Organization, Inc. had a rate that was higher than (not as good as) the NMH.

MARR compared to the 2003 MARR and the NMH

- The 2004 MARR was the same as the 2003 MARR.
- The 2004 MARR was lower than (better than) the NMH.

For the five or more visits numerator, AMERIGROUP Maryland, Inc., Helix Family Choice, Inc., Jai Medical Systems Managed Care Organization, Inc., Maryland Physicians Care, Priority Partners and United Healthcare of the Mid-Atlantic, Inc. were able to report this numerator.

MCOs compared to the Maryland Average Reportable Rate (MARR)

- AMERIGROUP Maryland, Inc., Helix Family Choice, Inc. and Maryland Physicians Care had rates that were higher than (better than) the MARR.
- Jai Medical Systems Managed Care Organization, Inc., Priority Partners and United Healthcare of the Mid-Atlantic, Inc. had rates that were lower than (not as good as) the MARR.

MCOs compared to the National Medicaid HEDIS 2003 Mean (NMH)

 AMERIGROUP Maryland, Inc., Helix Family Choice, Inc., Jai Medical Systems Managed Care Organization, Inc., Maryland Physicians Care, Priority Partners and United Healthcare of the Mid-Atlantic, Inc. had rates that were higher than (better than) the NMH.

MARR compared to the 2003 MARR and the NMH

- The 2004 MARR was higher than (better than) the 2003 MARR.
- The 2004 MARR was higher than (better than) the NMH.
- (11) Well-Child Visits in the Third, Fourth, Fifth and Sixth Year of Life measures members who were three, four, five or six years old during calendar year 2003, who were continuously enrolled during the reporting year (with no more than one gap in enrollment of up to 30 day eligibility period during the reporting year) and who received one or more well-child visit(s) with a primary care provider during the reporting year.

Significance: During the third through sixth years of life, a child develops in key areas including physical growth, speech and language skills, problem solving, and motor skills coordination. Well-child visits permit early detection and treatment of problems and provide an opportunity for preventive care and parental counseling. This HEDIS measure evaluates the degree to which the MCO insures children continue to receive the necessary preventive health services at a time in their life when it is possible to identify problems and help reduce the future impact of untreated medical and emotional problems.

Findings: AMERIGROUP Maryland, Inc., Helix Family Choice, Inc., Jai Medical Systems Managed Care Organization, Inc., Maryland Physicians Care, Priority Partners and United Healthcare of the Mid-Atlantic, Inc. were able to report this measure.

MCOs compared to the Maryland Average Reportable Rate (MARR)

- AMERIGROUP Maryland, Inc. and Helix Family Choice, Inc. had rates that were higher than (better than) the MARR.
- Maryland Physicians Care and Priority Partners had rates that were lower than (not as good as) the MARR.
- Jai Medical Systems Managed Care Organization, Inc. and United Healthcare of the Mid-Atlantic, Inc. had rates that were the same as the MARR.

MCOs compared to the National Medicaid HEDIS 2003 Mean (NMH)

 AMERIGROUP Maryland, Inc., Helix Family Choice, Inc., Jai Medical Systems Managed Care Organization, Inc., Maryland Physicians Care, Priority Partners and United Healthcare of the Mid-Atlantic, Inc. had rates that were higher than (better than) the NMH.

MARR compared to the 2003 MARR and the NMH

- The 2004 MARR was similar to the 2003 MARR.
- The 2004 MARR was higher than (better than) the NMH.

(12) <u>Adolescent Well-Care Visits</u> – measures members who were age 12 through 21 years during calendar year 2003 who were continuously enrolled during the measurement year (with no more than one gap in enrollment of up to 30 day eligibility period for Medicaid during the reporting year) and who had at least one comprehensive well-care visit with a primary care practitioner or an OB/GYN practitioner during calendar year 2003.

Significance: During the 12th through 21st year of life, it is necessary to assess the physical, emotional and social aspects of health through regular well-care visits. The visits also enable the health care provider to offer lifestyle and disease prevention guidance. This HEDIS measure evaluates the degree to which the MCO insures teenagers receive the necessary preventive health services at a time in their lives when it is possible to identify problems and implement necessary modalities of care, whether for physical issues or emotional problems.

Findings: AMERIGROUP Maryland, Inc., Helix Family Choice, Inc., Jai Medical Systems Managed Care Organization, Inc., Maryland Physicians Care, Priority Partners and United Healthcare of the Mid-Atlantic, Inc. were able to report this measure.

MCOs compared to the Maryland Average Reportable Rate (MARR)

- AMERIGROUP Maryland, Inc. and Jai Medical Systems Managed Care Organization, Inc. had rates that were higher than (better than) the MARR.
- Maryland Physicians Care, Priority Partners and United Healthcare of the Mid-Atlantic, Inc. had rates that were lower than (not as good as) the MARR.
- Helix Family Choice, Inc. had a rate that was similar to the MARR.

MCOs compared to the National Medicaid HEDIS 2003 Mean (NMH)

 AMERIGROUP Maryland, Inc., Helix Family Choice, Inc., Jai Medical Systems Managed Care Organization, Inc., Maryland Physicians Care, Priority Partners and United Healthcare of the Mid-Atlantic, Inc. had rates that were higher than (better than) the NMH.

MARR compared to the 2003 MARR and the NMH

- The 2004 MARR was the same as the 2003 MARR.
- The 2004 MARR was higher than (better than) the NMH.
- (13) <u>Discharges and Average Length of Stay Maternity Care</u> measures how many enrolled women gave birth during calendar year 2003 and how long the women remained in the hospital on average after vaginal births or Cesarean section deliveries.

Significance: Childbirth is a very common reason for hospitalization. This measure describes how many women enrolled in the MCO gave birth during the reporting year and how long the women remained in the hospital on average after vaginal births or Cesarean section deliveries. This HEDIS measure serves as a complementary measure to the MCO's rates in the Prenatal and Postpartum Care where adequate prenatal care often results in shorter lengths of stay for the delivery and lower C-Section rates because of less complications occurring during childbirth.

Findings: AMERIGROUP Maryland, Inc., Helix Family Choice, Inc., Jai Medical Systems Managed Care Organization, Inc., Maryland Physicians Care, Priority Partners and United Healthcare of the Mid-Atlantic, Inc. were able to report this measure.

Special Note for the total deliveries, total vaginal deliveries and total c-section deliveries discharges per 1000 female member months

NCQA dropped the 0-9 years of age stratification requirement in the member months calculation. Instead of calculating member months from age 0-65+, the member months are now calculated from age 10-65+. Due to this change, the total female member months significantly decreased from prior years and the rates per 1,000 member months increased (same or larger numerator with a smaller denominator). As a result, a comparison to the previous year's results for this numerator would not be appropriate. This change had no impact on other rates/measures such as length of stay. Therefore, a

comparison was only done between the MCO and the MARR. There was no comparison done with the National Medicaid HEDIS means because the most current year, 2003, was based on the previous inclusion of the 0-9 age stratification.

For Total Deliveries – Discharges per 1000 Female Member Months:

MCOs compared to the Maryland Average Reportable Rate (MARR)

- Helix Family Choice, Inc., Maryland Physicians Care and United Healthcare of the Mid-Atlantic, Inc. had rates that were higher than the MARR.
- Jai Medical Systems Managed Care Organization, Inc. had a rate that was lower than the MARR.
- AMERIGROUP Maryland, Inc. had a rate that was similar to the MARR.
- Priority Partners had a rate that was the same as the MARR.

MCOs compared to the National Medicaid HEDIS 2003 Mean (NMH)

• As stated in the special note, this numerator had specification changes for this reporting year (2004) and a comparison to the results from previous years would not be appropriate.

MARR compared to the 2003 MARR and the NMH

• As stated in the special note, this numerator had specification changes for this reporting year (2004) and a comparison to the results from previous years would not be appropriate.

For Average Length of Stay (all deliveries):

MCOs compared to the Maryland MCO Average (MMA)

- AMERIGROUP Maryland, Inc., Maryland Physicians Care, Priority Partners, and United Healthcare of the Mid-Atlantic, Inc. had averages that were similar to the MMA.
- Helix Family Choice, Inc. and Jai Medical Systems Managed Care Organization, Inc. had averages that were the same as the MMA.

MCOs compared to the National Medicaid HEDIS 2003 Mean (NMH)

 AMERIGROUP Maryland, Inc., Helix Family Choice, Inc., Jai Medical Systems Managed Care Organization, Inc., Maryland Physicians Care, Priority Partners and United Healthcare of the Mid-Atlantic, Inc. had averages that were similar to the NMH.

MMA compared to the 2003 MMA and the NMH

- The 2004 MMA was the same as the 2003 MMA.
- The 2004 MMA was similar to the NMH.

For Vaginal Deliveries – Discharges per 1000 Female Member Months:

MCOs compared to the Maryland Average Reportable Rate (MARR)

- Helix Family Choice, Inc. had a rate that was higher than the MARR.
- Jai Medical Systems Managed Care Organization, Inc. had a rate that was lower than the MARR.
- Maryland Physicians Care, Priority Partners and United Healthcare of the Mid-Atlantic, Inc. had rates that were similar to the MARR.
- AMERIGROUP Maryland, Inc. had a rate that was the same as the MARR.

MCOs compared to the National Medicaid HEDIS 2003 Mean (NMH)

• As stated in the special note, this numerator had specification changes for this reporting year (2004) and a comparison to the results from previous years would not be appropriate.

MARR compared to the 2003 MARR and the NMH

• As stated in the special note, this numerator had specification changes for this reporting year (2004) and a comparison to the results from previous years would not be appropriate.

For Average Length of Stay (Vaginal deliveries):

MCOs compared to the Maryland MCO Average (MMA)

- Maryland Physicians Care and United Healthcare of the Mid-Atlantic, Inc. had averages that were similar to the MMA.
- AMERIGROUP Maryland, Inc., Helix Family Choice, Inc., Jai Medical Systems Managed Care Organization, Inc. and Priority Partners had averages that were the same as the MMA.

MCOs compared to the National Medicaid HEDIS 2003 Mean (NMH)

 AMERIGROUP Maryland, Inc., Helix Family Choice, Inc., Jai Medical Systems Managed Care Organization, Inc., Maryland Physicians Care, Priority Partners and United Healthcare of the Mid-Atlantic, Inc. had averages that were similar to the NMH.

MMA compared to the 2003 MMA and the NMH

- The 2004 MMA was the same as the 2003 MMA.
- The 2004 MMA was similar to the NMH.

For Cesarean Deliveries – Discharges per 1000 Female Member Months:

MCOs compared to the Maryland Average Reportable Rate (MARR)

- United Healthcare of the Mid-Atlantic, Inc. had a rate that was higher than the MARR.
- Jai Medical Systems Managed Care Organization, Inc. had a rate that was lower than the MARR.
- AMERIGROUP Maryland, Inc., Helix Family Choice, Inc., Maryland Physicians Care and Priority Partners had
 rates that were similar to the MARR.

MCOs compared to the National Medicaid HEDIS 2003 Mean (NMH)

• As stated in the special note, this numerator had specification changes for this reporting year (2004) and a comparison to the results for previous years would not be appropriate.

MARR compared to the 2003 MARR and the NMH

• As stated in the special note, this numerator had specification changes for this reporting year (2004) and a comparison to the results for previous years would not be appropriate.

For Average Length of Stay (Cesarean deliveries):

MCOs compared to the Maryland MCO Average (MMA)

- AMERIGROUP Maryland, Inc., Helix Family Choice, Inc., Jai Medical Systems Managed Care Organization, Inc., Maryland Physicians Care and Priority Partners had averages that were similar to the MMA.
- United Healthcare of the Mid-Atlantic, Inc. had an average that was the same as the MMA.

MCOs compared to the National Medicaid HEDIS 2003 Mean (NMH)

- Helix Family Choice, Inc. and Jai Medical Systems Managed Care Organization, Inc. had rates that were higher than
 the NMH.
- AMERIGROUP Maryland, Inc., Priority Partners and United Healthcare of the Mid-Atlantic, Inc. had averages that were similar to the NMH.
- Maryland Physicians Care had an average that was the same as the NMH.

MMA compared to the 2003 MMA and the NMH

- The 2004 MMA was the same as the 2003 MMA.
- The 2004 MMA was similar to the NMH.
- (14) <u>Births and Average Length of Stay, Newborns</u> measure reports information on total newborns, well newborns and complex newborns discharged during calendar year 2003 per thousand female member months.

Significance: Newborns are identified and reported separately from maternity members. Newborn care is defined as care provided from birth to discharge to home. If a newborn is transferred from one hospital to another and has never gone home, the care is still newborn care. Newborn care that is rendered after the baby has been initially discharged should be reported in the Inpatient Utilization – General Hospital/Acute Care measure.

Newborns delivered in an inpatient setting and at birthing centers should be included in this measure. For newborns delivered in birthing centers, count one day of stay.

Some MCOs do not keep separate records on well newborns that leave the hospital at the same time as their mother. MCOs must develop a methodology to estimate the number of well newborns for whom the MCO does not produce separate discharge abstracts (for example, using the mother's length of stay as a proxy for the well newborn's length of stay). To report newborns that are members when the mother is not a member of the MCO, MCOs will need to develop a method that links the newborn to the mother. This HEDIS measure serves as a complementary measure to the MCO's rates in the Prenatal and Postpartum Care where adequate prenatal care often results in shorter lengths of stay for newborn and lower complex newborn rates (lengths of stay in excess of 5 days).

Findings: AMERIGROUP Maryland, Inc., Helix Family Choice, Inc., Jai Medical Systems Managed Care Organization, Inc., Maryland Physicians Care, Priority Partners and United Healthcare of the Mid-Atlantic, Inc. were able to report this measure.

For Total Newborn Discharges:

MCOs compared to the Maryland Average Reportable Rate (MARR)

- Helix Family Choice, Inc. had a rate that was higher than the MARR.
- Jai Medical Systems Managed Care Organization, Inc. had a rate that was lower than the MARR.
- AMERIGROUP Maryland, Inc., Maryland Physicians Care and United Healthcare of the Mid-Atlantic, Inc. had rates that were similar to the MARR.
- Priority Partners had a rate that was the same as the MARR.

MCOs compared to the National Medicaid HEDIS 2003 Mean (NMH)

- AMERIGROUP Maryland, Inc., Helix Family Choice, Inc. and Maryland Physicians Care had rates that were higher than the NMH.
- Jai Medical Systems Managed Care Organization, Inc. had a rate that was lower than the NMH.
- Priority Partners and United Healthcare of the Mid-Atlantic, Inc. had rates that were similar to the NMH.

MARR compared to the 2003 MARR and the NMH

- The 2004 MARR was similar to the 2003 MARR.
- The 2004 MARR was similar to the NMH.

For Average Length of Stay (total newborn discharges):

MCOs compared to the Maryland MCO Average (MMA)

- Jai Medical Systems Managed Care Organization, Inc. had an average that was higher than the MMA.
- Helix Family Choice, Inc. and Priority Partners had averages that were lower than the MMA.
- AMERIGROUP Maryland, Inc., Maryland Physicians Care and United Healthcare of the Mid-Atlantic, Inc. had averages that were similar to the MMA.

MCOs compared to the National Medicaid HEDIS 2003 Mean (NMH)

- AMERIGROUP Maryland, Inc., Jai Medical Systems Managed Care Organization, Inc. and United Healthcare of the Mid-Atlantic, Inc. had averages that were higher than the NMH.
- Helix Family Choice, Inc., Maryland Physicians Care and Priority Partners had averages that were similar to the NMH.

MMA compared to the 2003 MMA and the NMH

- The 2004 MMA was similar to the 2003 MMA.
- The 2004 MMA was similar to the NMH.

For Total Well Newborn Discharges per 1000 female member months:

MCOs compared to the Maryland Average Reportable Rate (MARR)

- Helix Family Choice, Inc. had a rate that was higher than the MARR.
- Jai Medical Systems Managed Care Organization, Inc. had a rate that was lower than the MARR.
- AMERIGROUP Maryland, Inc., Maryland Physicians Care, Priority Partners and United Healthcare of the Mid-Atlantic, Inc. had rates that were similar to the MARR.

MCOs compared to the National Medicaid HEDIS 2003 Mean (NMH)

- AMERIGROUP Maryland, Inc., Helix Family Choice, Inc. and Maryland Physicians Care had rates that were higher than the NMH.
- Jai Medical Systems Managed Care Organization, Inc. had a rate that was lower than the NMH.
- Priority Partners and United Healthcare of the Mid-Atlantic, Inc. had rates that were similar to the NMH.

MARR compared to the 2003 MARR and the NMH

• The 2004 MARR was similar to the 2003 MARR and the NMH.

For Average Length of Stay (well newborn discharges):

MCOs compared to the Maryland MCO Average (MMA)

- AMERIGROUP Maryland, Inc., Jai Medical Systems Managed Care Organization, Inc., Maryland Physicians Care and Priority Partners had averages that were similar to the MMA.
- Helix Family Choice, Inc. and United Healthcare of the Mid-Atlantic, Inc. had averages that were the same as the MMA.

MCOs compared to the National Medicaid HEDIS 2003 Mean (NMH)

- AMERIGROUP Maryland, Inc., Helix Family Choice, Inc., Jai Medical Systems Managed Care Organization, Inc., Priority Partners and United Healthcare of the Mid-Atlantic, Inc. had averages that were similar to the NMH.
- Maryland Physicians Care had an average that was the same as the NMH.

MMA compared to the 2003 MMA and the NMH

• The 2004 MMA was the same as the 2003 MMA and similar to the NMH.

For Total Complex Newborn discharges per 1000 female member months:

MCOs compared to the Maryland Average Reportable Rate (MARR)

- AMERIGROUP Maryland, Inc., Helix Family Choice, Inc. and Jai Medical Systems Managed Care Organization, Inc. had rates that were the same as the MARR.
- Maryland Physicians Care, Priority Partners and United Healthcare of the Mid-Atlantic, Inc. had rates that were similar to the MARR.

MCOs compared to the National Medicaid HEDIS 2003 Mean (NMH)

- AMERIGROUP Maryland, Inc., Helix Family Choice, Inc. and Jai Medical Systems Managed Care Organization, Inc. had rates that were similar to the NMH.
- Maryland Physicians Care, Priority Partners and United Healthcare of the Mid-Atlantic, Inc. had rates that were the same as the NMH.

MARR compared to the 2003 MARR and the NMH

• The 2004 MARR was the same as the 2003 MARR and similar to the NMH.

For Average Length of Stay (complex newborn discharges):

MCOs compared to the Maryland MCO Average (MMA)

- AMERIGROUP Maryland, Inc. and United Healthcare of the Mid-Atlantic, Inc. had averages that were higher than
 the MMA.
- Helix Family Choice, Inc., Jai Medical Systems Managed Care Organization, Inc., Maryland Physicians Care and Priority Partners had averages that were lower than the MMA.

MCOs compared to the National Medicaid HEDIS 2003 Mean (NMH)

- AMERIGROUP Maryland, Inc. and United Healthcare of the Mid-Atlantic, Inc. had averages that were higher than
 the NMH.
- Helix Family Choice, Inc., Jai Medical Systems Managed Care Organization, Inc. and Priority Partners had averages that were lower than the NMH.
- Maryland Physicians Care had a rate that was similar to the NMH.

MMA compared to the 2003 MMA and the NMH

• The 2004 MMA was lower than the 2003 MMA and similar to the NMH.

(D) HEALTH PLAN STABILITY DOMAIN:

(15) Practitioner Turnover – measure reports data on the percentage of primary care physicians affiliated with the MCO as of December 31 of the year preceding the measurement year who were <u>not</u> affiliated with the MCO as of December 31 of the measurement year. The measure also reports data on the percentage of non-physician primary care practitioners affiliated with the MCO as of December 31 of the year preceding the measurement year who were <u>not</u> affiliated with the MCO as of December 31 of the measurement year.

For the Medicaid product line only, MCOs also report the same percentages for the following practitioners:

- OB/GYN and other prenatal care practitioners
- Chemical dependency practitioners
- Mental health practitioners
- Dentists.

<u>Significance:</u> This measure indicates the likelihood that a provider will stay with the plan over the long term and, therefore, the likelihood that patients will not have to change providers.

If providers leave a plan in large numbers, it may be a sign of poor management. When they are satisfied with the way the plan is run, they are probably more likely to stay in the network. However, a high rate in this measure may also signal that the plan is ending contracts with physicians who are believed not to adhere to the plan's standard of care. Therefore, purchasers should use this measure as a starting point for discussions with the health plan.

<u>Findings:</u> AMERIGROUP Maryland, Inc., Helix Family Choice, Inc., Jai Medical Systems Managed Care Organization, Inc., Maryland Physicians Care, Priority Partners and United Healthcare of the Mid-Atlantic, Inc. were able to report this measure.

For the turnover rate for Primary Care Practitioners numerator:

MCOs compared to the Maryland Average Reportable Rate (MARR)

- Helix Family Choice, Inc. and United Healthcare of the Mid-Atlantic, Inc. had rates that were higher than (not as good as) the Maryland Average Reportable Rate (MARR).
- Jai Medical Systems Managed Care Organization, Inc., Maryland Physicians Care and Priority Partners had rates that were lower than (better than) the MARR.

• AMERIGROUP Maryland, Inc. had a rate that was similar to the MARR.

MCOs compared to the National Medicaid HEDIS 2003 Mean (NMH)

- Jai Medical Systems Managed Care Organization, Inc., Maryland Physicians Care and Priority Partners had rates that were lower than (better than) the NMH.
- AMERIGROUP Maryland, Inc., Helix Family Choice, Inc. and United Healthcare of the Mid-Atlantic, Inc. had rates that were similar to the NMH.

MARR compared to the 2003 MARR and the NMH

• The 2004 MARR was similar to the 2003 MARR and lower than the NMH.

For the turnover rate for OB/GYN Physicians numerator:

MCOs compared to the Maryland Average Reportable Rate (MARR)

- Helix Family Choice, Inc. and Jai Medical Systems Managed Care Organization, Inc. had rates that were higher than (not as good as) the MARR.
- AMERIGROUP Maryland, Inc., Maryland Physicians Care and United Healthcare of the Mid-Atlantic, Inc. had rates that were lower than (better than) the MARR.
- Priority Partners had a rate that was the same as the MARR.

MCOs compared to the National Medicaid HEDIS 2003 Mean (NMH)

- Helix Family Choice, Inc., Jai Medical Systems Managed Care Organization, Inc. and Priority Partners had rates that were higher than (not as good as) the NMH.
- Maryland Physicians Care had a rate that was lower than (better than) the NMH.
- AMERIGROUP Maryland, Inc. and United Healthcare of the Mid-Atlantic, Inc. had rates that were similar to the NMH.

MARR compared to the 2003 MARR and the NMH

- The 2004 MARR was similar to the 2003 MARR.
- The 2004 MARR was higher than the NMH.

HealthChoice HEDIS 2004 Results

The HealthChoice HEDIS 2004 results are displayed in the attached Table A. The table presents the audited results for each measure for the past three years and includes: (1) names of MCOs submitting reportable results; (2) Maryland Average Reportable Rate for all Maryland MCOs that provided audited and reportable data; and (3) a National Medicaid HEDIS Mean.

Conclusion

The audit process provides a continuous learning opportunity for the HealthChoice MCOs. In 2004, the MCOs demonstrated continued improvement in their understanding of the audit process and the requirements of the audit. In addition, the MCOs have demonstrated significant improvement in their data collection processes, data completeness, standardization of coding, and commitment of sufficient financial and staff resources to the reporting process. This was particularly evident in several MCOs that, for the past three years, have consistently had lower scores than other MCOs. Another motivating influence was the publication of the Consumer Report Card that provided rankings of MCO performance. The Consumer Report Card combined with the institution of the Value Based Purchasing Initiative strengthened the MCOs commitment to improving their HEDIS scores across all measures.

All of the MCOs were able to report the 15 HEDIS 2003 required measures, and all MCOs received an audit designation of "Report" for these measures. Several MCOs, including MCOs that are part of a larger corporate network, demonstrated significant improvement in measure rates over prior reporting years. The MCOs demonstrated a concerted effort to improve scores and allocate sufficient resources to this project so that medical record review was performed on potential hybrid measures.

There are additional recommendations for improvements that include:

- MCOs must continue to improve upon data completeness that includes submission of all claims and encounters, particularly by capitated providers, and monitoring the comprehensiveness of coding on these same claims and encounters;
- MCOs must improve upon the use of administrative databases to supplement their transaction systems, particularly where encounters are not routinely submitted by capitated providers or measures have "look back" periods when the member may not have been assigned to the MCO; and
- MCOs must provide close oversight of any vendor contracted to provide services (e.g., pharmacy, lab, vision) and make sure vendors provide comprehensive and accurate data supporting their performance.

For HEDIS 2005, DHMH should expect all MCOs to show continued performance improvements in all required measures. MCOs, including those that operate as a part of a corporate network, should allocate sufficient resources to support the reporting process, including medical record review where appropriate. Additionally, all MCOs have started to realize the importance of administrative data and the positive impact of data completeness in reducing this medical record review burden. Auditors will continue to provide each MCO with recommendations that will reduce the administrative burden of reporting and concurrently improve scores. Discussions after the DST submission and publication of the Final Audit Report between the MCOs and auditors will focus on pending or anticipated changes in reporting processes, system changes and vendor contracting.

	HE	AL.	ТНС	НО	ICE	MC	ОН	EDI	S 20	04 I	MEA	SU	RES	5 – F	REP	ORI	ΓED	RA	TES					
Domain: Effectiveness of Care	AGM 2002	AGM 2003	AGM 2004	HFC 2002	HFC 2003	HFC 2004	JMS 2002	JMS 2003	JMS 2004	MPC 2002	MPC 2003	MPC 2004	PP 2002	PP 2003	PP 2004	UHC 2002	UHC 2003	UHC 2004	MARR 2002	MARR 2003	MARR 2004	NMH 2001	NMH 2002	NMH 2003
Childhood Immunization Rates																								
DTP	52%	66%	84%	74%	73%	79%	68%	64%	82%	86%	86%	77%	74%	74%	80%	50%	59%	71%	67%	70%	79%	69%	70%	68%
IPV	70%	74%	90%	83%	86%	90%	82%	79%	89%	88%	87%	91%	86%	83%	88%	63%	70%	83%	79%	80%	88%	82%	77%	80%
MMR	55%	87%	93%	76%	86%	93%	81%	86%	88%	88%	88%	92%	78%	89%	91%	56%	76%	88%	72%	86%	91%	76%	84%	84%
Hib	54%	74%	88%	75%	80%	86%	81%	74%	85%	78%	81%	83%	76%	75%	84%	49%	65%	74%	69%	75%	84%	74%	74%	74%
Hepatitis B	51%	65%	88%	75%	83%	85%	78%	71%	85%	82%	80%	80%	76%	77%	80%	53%	62%	74%	69%	73%	82%	73%	74%	76%
VZV	60%	81%	89%	81%	84%	90%	82%	84%	87%	85%	85%	91%	86%	88%	88%	62%	74%	87%	76%	83%	89%	67%	73%	76%
Combo 1 (DTP, OPV or IPV, MMR, Hep B, Hib)	38%	49%	80%	60%	67%	71%	61%	53%	75%	70%	69%	62%	63%	61%	69%	38%	46%	55%	55%	58%	68%	56%	59%	57%
Combo 2 (all of Combo 1 plus at least 1 VZV)	36%	48%	78%	58%	65%	68%	61%	53%	75%	68%	66%	61%	62%	61%	68%	35%	45%	54%	53%	56%	67%	47%	52%	53%
Adolescent Immunization Rates																								
MMR	39%	68%	77%	56%	72%	71%	NR	83%	91%	53%	63%	81%	54%	57%	73%	NR	54%	58%	51%	66%	75%	50%	57%	63%
Hepatitis B	24%	35%	53%	36%	45%	47%	NR	36%	50%	38%	45%	50%	34%	42%	55%	NR	34%	36%	33%	39%	49%	31%	38%	46%
VZV	21%	32%	56%	38%	46%	48%	NR	51%	64%	34%	44%	46%	36%	44%	54%	NR	23%	42%	32%	40%	52%	20%	26%	32%
Combo 1 (for all antigens)	22%	34%	50%	33%	41%	46%	NR	34%	49%	34%	42%	48%	27%	37%	52%	NR	32%	34%	29%	37%	46%	28%	36%	42%
Combo 2 (for MMR and Hepatitis B)	11%	21%	42%	20%	30%	35%	NR	28%	45%	23%	31%	32%	18%	27%	41%	NR	14%	26%	18%	25%	37%	13%	18%	24%
Breast Cancer Screening Rates	39%	43%	41%	52%	56%	60%	48%	50%	58%	49%	54%	56%	57%	54%	53%	54%	57%	52%	50%	52%	53%	55%	55%	56%
Cervical Cancer Screening Rates	40%	52%	63%	53%	55%	65%	NR	52%	54%	49%	51%	63%	48%	59%	64%	55%	52%	58%	49%	54%	61%	58%	60%	62%
Comprehensive Diabetic Care Rates																								
HbA1c Testing	62%	68%	86%	72%	78%	81%	NR	79%	86%	74%	77%	82%	81%	83%	80%	67%	69%	71%	71%	76%	81%	68%	70%	72%
Poor HbA1c Control	NR	83%	41%	43%	35%	35%	NR	40%	37%	53%	48%	54%	50%	47%	49%	60%	51%	49%	52%	51%	44%	56%	51%	50%
Eye Exam	29%	45%	48%	53%	53%	45%	NR	44%	55%	52%	55%	45%	44%	42%	38%	36%	41%	50%	43%	47%	47%	42%	45%	46%
LDL-C Screening	60%	74%	89%	77%	76%	85%	NR	88%	94%	62%	77%	89%	74%	79%	80%	69%	73%	81%	68%	78%	86%	59%	65%	70%
LDL-C Level (less than 130 numerator)	NR	18%	55%	38%	48%	56%	NR	71%	71%	34%	46%	49%	42%	50%	47%	36%	38%	55%	38%	45%	56%	32%	37%	43%
LDL-C Level (less than 100 numerator)	*	*	35%	*	*	33%	*	*	48%	*	*	33%	*	*	32%	*	*	31%	*	*	35%	*	*	*
Monitoring for Diabetic Nephropathy	27%	36%	57%	42%	50%	39%	NR	30%	85%	24%	71%	43%	49%	63%	48%	41%	44%	34%	37%	49%	51%	39%	41%	48%

* New numerator for 2004

MCOs:

Benchmarks:

28

HEDIS 2004 Executive Summary AGM =

AGM = AMERIGROUP Maryland, Inc. JMS = Jai Medical Systems Managed Care Organization, Inc. PP = Priority Partners HFC = Helix Family Choice, Inc.

MARR = Maryland Average Reportable Rate

NMH = National Medicaid HEDIS Mean

MPC = Maryland Physicians Care

UHC = United Healthcare of the Mid-Atlantic, Inc.

					<u> </u>	NA 0 (<u> </u>		2 00	04.		CLIE	250		ED/	\DT	ED	DAT	FFO					
HEALTHCHOICE MCO HEDIS 2004 MEASURES – REPORTED RATES																								
Domain:																								
Access/Availability of	AGM 2002	AGM 2003	AGM 2004	HFC 2002	HFC 2003	HFC 2004	JMS 2002	JMS 2003	JMS 2004	MPC 2002	MPC 2003	MPC 2004	PP 2002	PP 2003	PP 2004	UHC 2002	UHC 2003	UHC 2004	MARR 2002	MARR 2003	MARR 2004	NMH 2001	NMH 2002	NMH 2003
Care																								
Children's and Adolescents' Access to Primary Care Practitioners Rates																								
12 - 24 Months	90%	94%	96%	94%	96%	95%	89%	88%	82%	90%	91%	94%	90%	91%	95%	91%	93%	95%	91%	92%	93%	88%	90%	91%
25 Months - 6 Years	77%	82%	88%	82%	89%	85%	77%	75%	78%	79%	83%	86%	76%	79%	80%	81%	84%	87%	79%	82%	84%	75%	79%	80%
7 Years - 11 Years	72%	84%	88%	84%	74%	78%	82%	80%	82%	85%	86%	88%	78%	81%	78%	84%	86%	89%	81%	82%	84%	76%	79%	80%
12 years – 19 years	*	*	82%	*	*	74%	*	*	76%	*	*	100%	*	*	75%	*	*	84%	*	*	82%	*	*	*
Adults' Access to Preventive/Ambulatory Health Services																								
Ages 20 - 44	57%	62%	72%	67%	66%	77%	61%	59%	66%	60%	66%	73%	65%	71%	76%	65%	65%	73%	63%	65%	73%	72%	73%	75%
Ages 45 - 64	71%	77%	81%	83%	85%	85%	83%	82%	84%	77%	79%	81%	80%	84%	85%	81%	83%	85%	79%	82%	84%	79%	80%	82%
Ages 65+	NA	65%	NA	NA	NA	NA	NA	NA	NA	NA	NA	76%	77%	77%										
TOPC and Postpartum Care Rates																								
Timeliness of Prenatal Care (TOPC)	63%	86%	92%	83%	91%	97%	NR	74%	83%	90%	84%	82%	65%	69%	82%	78%	86%	81%	76%	82%	86%	71%	72%	70%
Postpartum Care	45%	55%	65%	45%	57%	58%	NR	49%	51%	55%	58%	58%	39%	57%	65%	57%	58%	61%	48%	56%	59%	48%	52%	52%

* New numerator for 2004 MCOs: Benchmarks: 29

HEALTH	CH	OIC	EN	1CC	H	EDIS	S 20	04	ME	ASI	JRE	ES -	· RE	PC	RT	ED	RA'	TES	;					
Domain: Use of Services	AGM 2002		AGM 2004	HFC 2002	HFC 2003	HFC 2004	JMS 2002	JMS 2003	JMS 2004	MPC 2002	MPC 2003	MPC 2004	PP 2002	PP 2003	PP 2004	UHC 2002	UHC 2003	UHC 2004	MARR 2002	MARR 2003	MARR 2004	NMH 2001	NMH 2002	NMH 2003
Frequency of Ongoing Prenatal Care	2002	2000	2004	2002	2000	2004	2002	2000	2004	2002	2000	2004	2002	2000	2004		2000	2004	2002	2000	2004	2001	2002	2003
Less than 21%	28%	19%	4%	5%	4%	4%	NR	9%	5%	4%	5%	4%	2%	5%	5%	38%	18%	26%	15%	10%	8%	30%	32%	28%
21% to 40%	9%	9%	1%	7%	5%	3%	NR	8%	3%	3%	5%	4%	3%	3%	6%	13%	10%	11%	7%	7%	5%	8%	8%	8%
41% to 60%	12%	14%	5%	8%	8%	8%	NR	15%	12%	3%	9%	7%	7%	7%	8%	9%	9%	11%	8%	10%	9%	8%	8%	9%
61% to 80%	17%	20%	13%	15%	16%	17%	NR	22%	8%	5%	16%	15%	11%	12%	15%	12%	12%	13%	12%	16%	13%	11%	11%	14%
Greater than 80%	33%	37%	77%	65%	67%	68%	NR	45%	71%	84%	66%	70%	66%	47%	53%	29%	51%	39%	55%	52%	63%	42%	40%	41%
Well-Child Visits in first 15 Mos. of Life Rates																								
0 Visits	7%	4%	3%	2%	1%	1%	NR	5%	11%	4%	4%	2%	7%	3%	2%	10%	7%	3%	6%	4%	4%	13%	9%	7%
1 Visit	4%	2%	0%	3%	2%	0%	NR	2%	2%	2%	2%	2%	3%	3%	3%	6%	4%	1%	4%	3%	1%	6%	5%	5%
2 Visits	6%	2%	2%	6%	3%	3%	NR	9%	3%	3%	2%	1%	4%	3%	3%	7%	6%	3%	5%	4%	2%	7%	7%	6%
3 Visits	9%	5%	4%	6%	8%	6%	NR	3%	4%	3%	3%	6%	7%	8%	8%	9%	9%	6%	7%	6%	5%	9%	10%	8%
4 Visits	14%	10%	8%	14%	10%	9%	NR	3%	10%	5%	7%	7%	14%	11%	10%	13%	11%	12%	12%	9%	9%	14%	14%	13%
5+ Visits	60%	77%	83%	69%	76%	82%	NR	79%	70%	82%	81%	83%	67%	72%	74%	55%	63%	74%	67%	75%	78%	52%	55%	61%
Well-Child Visits in 3rd, 4th, 5th and 6th Yr. of Life Rates	63%	71%	77%	67%	64%	73%	NR	75%	70%	65%	72%	65%	62%	60%	65%	64%	66%	70%	64%	68%	70%	51%	55%	58%
Adolescent Well-Care Visit Rate	44%	56%	54%	51%	44%	49%	NR	60%	54%	36%	41%	44%	41%	43%	43%	31%	44%	43%	41%	48%	48%	30%	32%	37%
Discharge & Average Length of Stay-Maternity Care																			MMA 2002	MMA 2003	MMA 2004			
Total Deliveries – Discharges per 1000 Member Months	**	**	10.7	**	**	13.1	**	**	6.2	**	**	11.0	**	**	10.4	**	**	11.0	**	**	10.4	**	**	**
Average Length of Stay	2.9	2.8	2.9	2.6	3.1	2.8	3.1	2.7	2.8	2.7	2.7	2.7	2.6	2.6	2.7	2.7	2.7	2.7	2.8	2.8	2.8	2.6	2.5	2.5
Vaginal Deliveries – Discharges per 1000 Member Months	**	**	7.9	**	**	10.4	**	**	5.0	**	**	8.2	**	**	8.0	**	**	8.1	**	**	7.9	**	**	**
Average Length of Stay	2.5	2.4	2.4	2.4	2.9	2.4	2.6	2.4	2.4	2.3	2.3	2.3	2.3	2.2	2.4	2.3	2.2	2.3	2.4	2.4	2.4	2.4	2.2	2.2
C-Section Deliveries - Discharges per 1000 Member Months	**	**	2.8	**	**	2.7	**	**	1.3	**	**	2.7	**	**	2.4	**	**	3.0	**	**	2.5	**	**	**
Average Length of Stay	4.2	4.2	4.1	4.5	4.3	4.4	4.5	3.9	4.3	3.9	3.9	3.7	4.0	3.9	3.8	3.9	3.9	4.0	4.2	4.0	4.0	3.7	3.9	3.7
Births and Average Length of Stay, Newborns																								
Total Newborns - Discharges/1000 Member Months	3.8	4.0	3.7	2.8	3.7	4.4	3.1	2.8	2.6	3.5	4.1	3.6	4.3	3.6	3.5	3.0	3.1	3.4	3.4	3.6	3.5	3.2	3.4	3.1
Average Length of Stay	4.2	4.1	3.9	4.0	3.7	3.0	4.8	4.2	4.1	3.4	3.7	3.3	3.3	3.7	3.0	3.9	3.3	3.9	3.9	3.8	3.5	3.0	3.2	3.2
Total Well Newborns - Discharges/1000 Member Months	3.4	3.6	3.3	2.5	3.3	4.0	2.6	2.2	2.1	3.1	3.6	3.3	3.9	3.2	3.1	2.7	2.8	3.1	3.0	3.1	3.2	3.0	3.2	2.8
Average Length of Stay	2.3	2.3	2.4	2.1	2.2	2.2	2.4	2.3	2.3	2.1	2.1	2.1	2.0	2.0	1.8	2.1	2.2	2.2	2.2	2.2	2.2	2.0	2.1	2.1
Total Complex Newborns - Discharges/1000 Member Months	0.5	0.4	0.4	0.3	0.4	0.4	0.5	0.6	0.4	0.3	0.4	0.3	0.4	0.4	0.3	0.3	0.3	0.3	0.4	0.4	0.4	0.2	0.3	0.3
Average Length of Stay	17.8	18.9	17.0	19.8	17.1	10.8	16.3	11.0	12.9	15.1	16.4	14.6	15.3	16.4	14.3	22.0	15.3	20.6	17.7	15.9	15.1	15.5	15.3	14.9

** = Specification change, comparison between years not appropriate

MCOs: Benchmarks:

UHC = United Healthcare of the Mid-Atlantic, Inc.

HEDIS 2004 Executive Summary

HEALTHCHOICE MCO HEDIS 2004 MEASURES – REPORTED RATES																								
Domain: Health Plan Stability	AGM 2002		AGM 2004			HFC 2004	JMS 2002	JMS 2003	JMS 2004	MPC 2002	MPC 2003	MPC 2004	PP 2002	PP 2003	PP 2004	UHC 2002	UHC 2003	UHC 2004		MARR 2003	MARR 2004	NMH 2001		NMH 2003
Practitioner Turnover																								
PCP Turnover	NR	22%	8%	16%	10%	9%	20%	0%	2%	3%	3%	2%	14%	3%	2%	NR	9%	12%	13%	8%	6%	11%	10%	10%
OB/GYN Turnover	NR	29%	9%	25%	21%	35%	22%	27%	20%	3%	1%	1%	15%	10%	15%	NR	7%	11%	16%	16%	15%	10%	10%	10%

MCOs: Benchmarks: 31